

RECEIVED

APR 11 2018

City of Waukesha

SPECIAL EVENT APPLICATION

WAUKESHA CITY CLERK

(Events with anticipated attendance in excess of 400)

201 Delafield Street
Waukesha, WI 53188
Phone: 262-524-3501
Fax: 262-524-3888

clerktreas@ci.waukesha.wi.us
www.ci.waukesha.wi.us

☐ NEW EVENT

☒ REPEAT EVENT

FEES: Daily fee \$25 / Seasonal Fee \$150

EVENT INFORMATION

Name of Event: **Run With the Cops 5K Fun Run/Walk**

Date(s) of Event: **August 17, 2018**

(Application must be submitted to Clerk's Office no later than 20 business days before the proposed event)

Name of Sponsoring Organization (if applicable) **Waukesha Police Department**

☒ Non-Profit Group Tax Exempt #: **047443**

☐ For Profit

☐ Other, please describe _____

Location(s) of Event: (attach map) **Veterans Park, Downtown Waukesha and Frame Park**

Time Set-up Begins: **1600 hours**

Time Event Begins: **1730 hours registration**

Ends: **2200 hours**

Description/Purpose of Event: **Build partnership with the Citizens of Waukesha, WPRF, community stakeholders and business owners.**

Estimated Attendance (400+): **400 people** based on **Previous 4 years entries.**

***MAP ATTACHMENT IS REQUIRED LISTING REQUESTED AREAS FOR CLOSURE AND PURPOSES INCLUDING ANY SIDEWALK VENDING.**

CONTACT INFORMATION

Contact person for event: **Lieutenant Jerry Habanek**

Address: **1901 Delafield Street**

City/State/Zip: **Waukesha, WI 53188**

Cell Phone: **262-893-6644**

Contact Number for Day of Event: **262-893-6644**

Email Address: **Ghabanek@waukesha-wi.gov**

SECURITY PLAN

Please include number of hours, location of deployment of personnel and equipment that will be provided: **We will have volunteers at all parts of the race course monitoring safety and security of the event.**

Has this event been discussed with the Police Department? ☒ Yes ☐ No

Will any additional City services be required? ☒ Yes ☐ No

If yes, please explain: **City garage cones and barricades. Park rec trailer.**

EVENT INFRASTRUCTURE

Please check the following applicable items regarding your event:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Entry fee or donations | <input type="checkbox"/> Sales of goods or merchandise* | <input type="checkbox"/> Sales of food* |
| <input checked="" type="checkbox"/> Staging | <input checked="" type="checkbox"/> Tents | <input type="checkbox"/> Filming/Movie production |
| <input checked="" type="checkbox"/> Amplified Sound or Music | <input type="checkbox"/> Other: _____ | |

*Additional Sidewalk Vending Permit may be required.

EMERGENCY ACTION PLAN

Items to consider: • First Aid • Weather • Crowd Control • Lost Child • Emergency Response

Do you have an emergency action plan? ☒ Yes

INDEMNIFICATION & HOLD HARMLESS AGREEMENT

In consideration of the issuance of a Special Event Permit and pursuant to the provisions of section 8.116 of the City of Waukesha Municipal Code, the undersigned **Waukesha Police Department** (Licensee), hereby agrees to indemnify and hold harmless the City of Waukesha, its officers, employees, agents and other contractors from and against all claims, demands, costs, judgments, losses, liabilities and/or damages of any kind or nature, including actual attorney fees, arising out of or relations to any activity or incident arising in connection with or in any way incident to the use of the public right of pursuant to the issuance of a special event permit. The undersigned warrants and represents specific authority to enter in to this agreement on behalf of the licensee.

I acknowledge that as applicant for this special event, I am responsible for the clean-up and removal of all debris as a result of the organized activity or event regulation by this section. (**GFH** Initial)

I also understand that cost incurred by the City shall be reimburse for "extraordinary damage" or any additional city personnel, equipment, services needed to address issues including, but not limited to traffic control, security, clean-up, sanitation and safety. The applicant shall pay the actual costs for use of such personnel, equipment or services. (**GFH** Initial)

PROOF OF INSURANCE NAMING THE CITY AS AN ADDITIONAL INSURED IS ATTACHED.

Applicant Name (Please print) **Gerald F. Habanek**

Signature of Applicant

Date

4-11-18

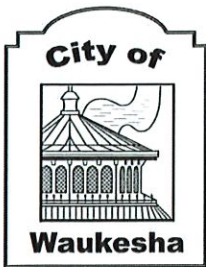
COMPLETE APPLICATION INCLUDES

Complete applications are required no later than 20 business days prior to any proposed event in order to obtain approval. Application will not be accepted without all documentation. Complete application includes:

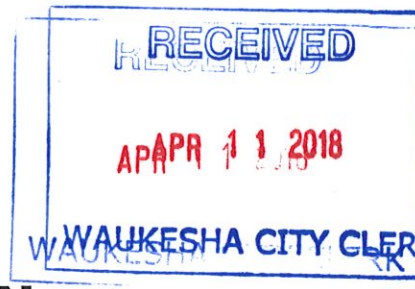
- ☒ Completed Special Event Application
- ☒ Detailed map of the event layout or route
- ☒ Daily fee of \$25 or Seasonal fee of \$150
- ☒ List Sidewalk Vendors or other activities and their proposed locations
- ☒ Agreements with other city departments (Park/Rec, Police, etc) – if applicable
- ☒ Proof of Insurance: The City requires that all organizers of Special Events provide liability insurance. An event sponsor shall be required to provide a valid certificate of insurance evidencing limits of liability not less than \$1,000,000 and name the **City of Waukesha, 201 Delafield Street, Waukesha, WI 53188** as an additional insured and certificate holder.

DEPARTMENT APPROVALS / FOR OFFICE USE

<input type="checkbox"/> Police _____	<input type="checkbox"/> Fire _____	<input type="checkbox"/> Engineering _____	<input type="checkbox"/> Transit _____
<input type="checkbox"/> WPRF _____	<input type="checkbox"/> Attorney _____	<input type="checkbox"/> City Administrator _____	<input type="checkbox"/> Finance _____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	City Clerk's Office _____	Date _____	



CITY OF WAUKESHA
CLERK TREASURER'S DEPARTMENT
201 Delafield Street, Waukesha WI 53188
City Hall Room 104
Tel: (262) 524-3550 Fax: (262) 524-3888
www.waukesha-wi.gov



STREET CLOSING APPLICATION

FOR CITY DEPARTMENTS OR EDUCATIONAL FACILITY APPLICANTS ONLY

(Parking lanes, sidewalks, municipal parking lots, or trails)

- Application must be submitted to the Clerk's Office no earlier than 270 days and no later than 20 days before the date of the closure.
- No permit or fee required if City is the applicant.
- \$50 late fee if application if application is submitted less than 45 days before event.
- No more than 400 people on closed right-of-way at any given time.
- Waukesha Municipal Code 6.17 regulates street closings. Please visit the City code book at www.waukesha-wi.gov
- Closures of Public Rights of Way are subject to the regulations as defined in [Waukesha Municipal Code 6.17 \(14\) a-h](#)

→ Are you a City of Waukesha department or an educational facility? ☒ Yes ☐ No

If you answered "No" to the above question, you cannot use this form. Please use the Street Closing Application for non city/educational facility applicants.

Applicant Information

Applicant's Name Lt. Gerald F. Habanek
Name of City Department or Educational Facility Waukesha Police Department
Phone Number 262-524-3769 Email Ghabanek@waukesha-wi.gov
Address (include city/zip) 1901 Delafield St. Waukesha, WI 53188

Event Information

Name of Event Run WITH the Cops Repeat Event? ☒ Yes ☐ No
Purpose of Event Build partnerships with the community, its business owners and other city departments.
Event website (if any) www.runwiththecopswaukesha.com
Date(s) of Proposed Event Friday, August 17, 2018
Time event will assemble 4:30pm in closed area (see map) Time event will begin 7:30 pm
Time event will end 9:30pm Time event will disband 10:00pm
Name of contact person on day of event Lt. Gerald F. Habanek Cell 262-893-6644

AREA OF STREET TO BE CLOSED - ATTACH MAP OF PROPOSED CLOSURE AND INDICATE PROPOSED USE:

W. Main street in front of Veteran's park at 4:30pm. W. Main Street from Waukesha Tattoo to connect with the street closure on W. Main St. from Friday Night Live. Streets periodically throughout the race course.

Number of blocks to be closed (block means the distance between intersections on a City Street, or 200 yards whichever is shorter) 3.1 miles

Number of Barricades Needed 61

Will this event include: Music? ☒ Yes ☐ No Vehicles? ☒ Yes ☐ No Animals? ☐ Yes ☒ No

If yes, please explain: There will be a D.J. at the start/finish line. Public Safety vehicles will be on display before the race.

Application continued →

Do you intend to place any objects or items into the proposed area of closure: ☐ Yes ☒ No

Do you intend to have any vending of items or services for sale or display into the proposed area of closure: ☐ Yes ☒ No

If you answered yes to either question above, please explain in full detail: _____

*Approximate maximum number in attendance at one time (additional regulations for large special events of more than 400) 400

Attendance estimate based on? Previous four years of event.

Fees for Educational Facilities Only – City Applicants are exempt from fees

The following street closing fees shall be paid when filing the applications, per application, and shall not be refundable.
City applicants are exempt from fees.

STREET CLOSING:	AMOUNT
Closure of 1 – 7 blocks	\$50.00
Closure of 8 or more blocks	\$150.00
Late Fee <i>(if filed less than 45 days before event)</i>	\$50.00

Applicant Signature

I hereby make an application for a Street Closing Permit as detailed above. I agree to abide by the requirements of all City of Waukesha ordinances and State laws.

☒ Signature

Date

4-11-18

FOR OFFICE USE ONLY!

Date Application Received in Clerk's Office _____ Clerk's Initials _____

☐ Map provided ☐ Amount Due _____ Date Paid: _____

Department Routing:

☐ Police _____ ☐ Fire _____ ☐ Engineering _____ ☐ Transit _____ ☐ WPRF _____ ☐ Attorney _____

☐ Approved ☐ Denied Clerk Processing Permit _____ Date _____

Municipal Lot Closure:

☐ Building & Grounds Committee Approval _____ ☐ Council Approval _____

MISC NOTES: _____





Waukesha Parks, Recreation and Forestry

1900 Aviation Dr
Waukesha, WI 53188

Phone: 262-524-3737

Fax: 262-524-3713

Account Schedule Report

Phone: (262) 524-3769

Waukesha Police Department

Gerald Habanek
1901 Delafield St.
Waukesha, WI 53188

Account Schedule - By Booking Number(s)

Booking Number(s): 4913

Date	Day	Complex	Facility	Event Type	Event Time	Dur.	Rate	Other Chg	Tax	Total
8/17/2018	Fri	Frame	Frame Riverwalk	Public Event	5:00 PM-10:00 PM	5/0	0.00	0.00	0.00	0.00
<i>Schedule Notes:</i> 30 trash barrels needed. 6 pop-up tents permitted. 3 port-o-pots WPRF trailer requested, work order put in 3/30/18.										
8/17/2018	Fri	Veterans P	Veterans Park	Public Event	5:00 PM-10:00 PM	5/0	0.00	0.00	0.00	0.00
<i>Schedule Notes:</i> 30 trash barrels needed. 6 pop-up tents permitted. 3 port-o-pots WPRF trailer requested, work order put in 3/30/18.										
10 (hrs) / 0 (min)						Sub Total		\$0.00		
						Tax		\$0.00		
						Grand Total		\$0.00		



Waukesha Parks, Recreation and Forestry

1900 Aviation Dr
Waukesha, WI 53188

Phone: 262-524-3737

Fax: 262-524-3713

Account Schedule Report

Phone: (262) 524-3769

Waukesha Police Department

PLEASE BRING THIS PERMIT WITH YOU TO YOUR EVENT.

Emergency Contact Numbers:

Mon - Fri: 8am-4:30pm (262) 524-3737
Mon - Fri: 4:30-11:00pm (262) 993-5882
Weekends/Holidays: (262) 993-4543

REFUND POLICY - If permit is cancelled for any reason:

30 DAYS PRIOR TO THE RESERVATION DATE - Refunds will be made when the customer's original permit is returned to WPRF, \$10 of the prepayment fee will be forfeited.

LESS THAN 30 DAYS - No refunds or credit for cancellations less than 30 days prior to the event.

INCLEMENT WEATHER - No refunds or credit for inclement weather.

HELPFUL REMINDERS (for the full list of policies please review our Policies & Procedures Form):

- Reservation ending time must be adhered to due to potential reservations following your event.
- Park Hours: Sunrise to 10:00 pm daily.
- All trash will be placed in trash receptacles. Leave the park the way you found it.
- If WPRF needs to repair or clean up your event, the responsible party will be billed for damages &/or labor.
- Be courteous of other park patrons (keep noise/music at acceptable levels)
- Any use of charcoal must be extinguished and removed from park.
- No small debris permitted (pinata, confetti, bird seed, etc.)
- No Inflatables permitted in any parks.
- All vehicles must park in designated parking areas only.
- No sales of any kind
- Dogs not allowed in City parks or as designated.
- Bathrooms are public restrooms available for public during park hours.
- Changes in original dates &/or times may be made up to one week prior to event. There will be no charge for the first change and a \$25 charge for each change thereafter. A \$25 charge for any changes within 5 business days of event.



WAUKCIT-01

BERON

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/02/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER American Advantage - Lindow 2311 Silvernail Rd Pewaukee, WI 53072	CONTACT NAME: PHONE (A/C, No, Ext): (262) 548-8070 FAX (A/C, No): (262) 548-0803 E-MAIL: ADDRESS:	
	INSURER(S) AFFORDING COVERAGE INSURER A: West Bend Mutual Insurance Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED Waukesha Citizens Police Academy Association Inc Academy Association Inc 1849 Waterview Ln Waukesha, WI 53189	NAIC # 15350	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		A39416400	01/01/2018	01/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The Certificate holder is listed as an additional insured on the general liability. Run With the Cops Friday 8-17-18

CERTIFICATE HOLDER

CANCELLATION

City of Waukesha Sgt. Habanek 1901 Delafield St Waukesha, WI 53188	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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